PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 should be completed where appropriate. All further correspondence including the Patert, advance orders and notification of maintenance fees will be mained to the current correspondence address as maintained unlines correspondence address as a district order of the Publication of the Control of the Publication of the Publication of maintenance fees will be mained to the current correspondence address, and/or (in hindexing a separate "FEE ADDRESS" or maintenance fee souffications

CHRESCH COMMISSIONORNCE ASSOCIATION UNIT HIGH I for any change of address.

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying napers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

DOSCORDA 23690 7590

Roche Diagnostics Corporation, Inc.

9115 Hague Road PO Box 50457

Indianapolis, IN 46250-0457

Certificate of Mailing or Transmission

I hereby cornly that this Fee(s) Transmiss on Irransmission

States Postal Service with sufficient postage for first class mail in an envelope
addressed to the Mail Stop ISSUE FEE address above, or being list-simile
transmitted to fine USPTO (571) 273-2885, on the date indicated below.

(Departments name) (Signature) (Sheet)

APPLICATION NO FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO RD8003012178 8765 (0)620.232 07/15/2003 Friedrich Ziegler

TITLE OF INVENTION: REFLECTION-PHOTOMETRIC: ANALYTICAL SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DOR	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FERISI DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0	\$1700	19/12/2006	
EXAMINER		ART ONIT	CLASS-SUBCLASS				
ALSOMIRI, ISAM A		3662	356-003010	'			
hange of correspondence address or indication of "Fee Address" (37- 1-159). L'inange of correspondence address (or Change of Correspondence Advises form PTO/SH/122) attached. Tee Address' indication for "Fee Address" indication form PTO/SH/12 with call of the Tee Address' indication form PTO/SH/17 Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For prinsing on the patent front page, list (1) the names of lap to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered antorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be panter.		ra 2 Roche Diagn	Marilyn L. Amick Roche Diagnostics Gerations, Inc.	

PLEASE NOTE: Unless an assigned is identified below, no assigned data will appear on the patent. If an assigned is identified below, the document has been filed for recordation as set forth in 37 CFR 3.41. Completion of this form is NOT a substitute for filling an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Roche Diagnostics Oberations, Inc.

Indianapolis, IN

Please check the appropriate assigned category or categories (will not be printed on the patent) : 🔲 Individual 👨 Corporation or other private group entity 🚨 Government

4s. The following fee(s) are submitted: X lasse Fee

D Publication Fee (No strail entity discount permitted) Advance Order - h of Copies

4b. Payment of Fee(s): (Please first reapply any previously paid issue for shown above) A check is enclosed. Payment by credit card. Form PTO 2038 is attached.

The Director is hereby authorized to charge the required feets), any deficiency, or credit any overpayment, to Deposit Account Number (12-1958) (enclose an extra copy of this form).

5 Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. Dh. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publicating Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in auteust as shown by the records of the United States Patent and Teatemark Office.

Authorized Sagnaruse Marilys

Registration No. 30,444

Typed or primed name Marilyn L. Amick

This collection of information is required by \$7.CFR.1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by \$3.5 LSC, 122 and \$3.7CFR.1.4. His collection is estimated to take 12 minutes to exemplet, including gathering, preprinting, and the collection is estimated to take 12 minutes to exemplet, including gathering, preprinting, and the formation of the complete control of the collection of the c

OMB 0651-0033

Under the Paperwork Reduction Act of 1995, no persons are required to respend to a collection of information unless it displays a valid OMB control number